

Application Data Sheet

Application Information

Application number:	10/519,020
Filing Date:	Not yet known
Application Type:	Regular
Subject Matter:	Utility
Suggested Classification:	
Suggested Group Art Unit:	
CD-ROM or CD-R:	None
Number of CD Disks:	
Number of copies of CDs:	
Sequence Submission?	
Computer Readable Form (CRF)?	
Number of Copies of CFR:	
Title:	METHOD AND APPARATUS FOR SPATIALLY COORDINATING, STORING AND MANIPULATING COMPUTER AIDED DESIGN DRAWINGS
Attorney Docket Number:	RBAR-0005
Request for Early Publication:	No
Request for Non-Publication:	No
Suggested Drawing Figure:	1
Total Drawing Sheets:	31
Small Entity?:	Yes
Latin name:	
Variety denomination name:	
Petition included?:	No
Petition Type:	
Licensed US Govt. Agency:	
Contract or Grant Numbers:	
Secrecy Order in Parent Appl.?:	No

Applicant Information

Applicant Authority Type: Inventor
Primary Citizenship Country: United States of America
Status: Full Capacity
Given Name: Robert
Middle Name: A
Family Name: Bell
Name Suffix:
City of Residence: Washington
State or Province of Residence: DC
Country of Residence: United States of America
Street of mailing address: 3218 O Street, N.W.
City of mailing address: Washington
State or Province of mailing address: DC
Country of mailing address: United States of America
Postal or Zip Code of mailing address: 20007

Correspondence Information

Correspondence Customer No.: 23377
Name:
Street of Mailing Address:
City of Mailing Address:
State or Province of Mailing Address:
Country of Mailing Address:
Postal or Zip Code of Mailing Address:
Phone number:
Fax number:

Representative Information

Representative Customer No.: 23377

Domestic Priority Information

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This is	An application claiming the benefit under 35 USC 119(e)	60/299,808	June 21, 2001
This is	An application claiming the benefit under 35 USC 119(e)	60/339,707	December 12, 2001

Foreign Priority Information

Country:	Application No.:	Filing Date:	Priority Claimed:
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Assignee Information

Assignee name:

Street of mailing address:

City of mailing address:

State or Province of mailing address:

Country of mailing address:

Postal or Zip Code of mailing address: